

CHILDREN'S HOME SOCIETY OF CALIFORNIA

DECLARATION

Parent Name (Please Print): _____

I declare this information is true and correct. I understand that a willful statement of false information for the purpose of receiving state subsidized child care services is considered fraud and is an offense punishable by law. I certify, under penalty of perjury, that the above information is accurate.

Signature

Date

FOR CHS OFFICE USE ONLY:

☐ Primary Parent ☐ Secondary Parent

Reason for verification: _____

Verified By (Name/ Title): _____

Verified with: _____ Date: _____

Verified via: _____

Notes: _____

Staff Signature: _____ Date: _____